Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Mark	Rhonda
	your government-issued picture identification (for	First name	First name
	example, your driver's	Lamont	Stone Keen
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Keen	Keen
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have		
	used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7063	xxx-xx-3198

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 2 of 56

Debtor 1 Mark Lamont Keen
Debtor 2 Rhonda Stone Keen Keen

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	3557 Gainey Road Fayetteville, NC 28306	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cumberland	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

# Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 3 of 56

	otor 1 otor 2	Mark Lamont Keel Rhonda Stone Kee					Case number (if known)			
Par	t 2:	Tell the Court About	Your Bank	ruptcy C	ase					
7.	Bank	chapter of the cruptcy Code you are	Check or (Form 20	ne. (For a 110)). Also	brief description of , go to the top of p	f each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.			
	choc	sing to file under	☐ Chapter 7							
			☐ Chap	ter 11						
			☐ Chap	ter 12						
			■ Chap	ter 13						
8.	How	you will pay the fee	abo	out how y	ou may pay. Typic attorney is submi	ally, if you are paying the fee yo	ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with			
							on, sign and attach the Application for Individuals to Pay			
			□ I re	equest that t is not red	at my fee be waiv quired to, waive yo	our fee, and may do so only if yo	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line th			
							n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.			
9.		you filed for cruptcy within the	■ No.							
		8 years?	☐ Yes.							
				District		When	Case number			
				District		When	Case number			
				District		When	Case number			
10.		any bankruptcy s pending or being	■ No							
	not f you,	by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.							
				Debtor			Relationship to you			
				District		When	Case number, if known			
				Debtor			Relationship to you			
				District		When	Case number, if known			
11.		ou rent your lence?	■ No.	Go to	line 12.					
			☐ Yes.	Has y	our landlord obtair	ned an eviction judgment agains	st you and do you want to stay in your residence?			
					No. Go to line 12	2.				
					Yes. Fill out <i>Initia</i> bankruptcy petiti		Judgment Against You (Form 101A) and file it with this			

# Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 4 of 56

	otor 1 Mark Lamont Kee otor 2 Rhonda Stone Ke			Case number (if known)
Par	Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number, Street, City, Sta	ate & ZIP Code  ox to describe your business:
	it to this petition.			ness (as defined in 11 U.S.C. § 101(27A))
				Il Estate (as defined in 11 U.S.C. § 101(51B))
			_ •	defined in 11 U.S.C. § 101(53A))
				er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business debtor?</i> For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	deadline operation	s. If you indicate that you are as, cash-flow statement, and s.C. 1116(1)(B).  I am not filing under Cha	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure pter 11.
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	rt 4: Report if You Own or	Have Any	/ Hazardous Property or Ar	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

#### Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 5 of 56

Debtor 1	Mark Lamont Keen	
Debtor 2	Rhonda Stone Keen Keen	Case number (if known)

Part 5: Explain Your Effort

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

# Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 6 of 56

	tor 1 tor 2	Mark Lamont Kee Rhonda Stone Kee			Ca	ise number (ii	if known)
Pari	t 6:	Answer These Questi	ions for Re	eporting Purposes			
	Wha	t kind of debts do have?	16a.				d in 11 U.S.C. § 101(8) as "incurred by an
	•			☐ No. Go to line 16b.			
				Yes. Go to line 17.			
			16b.	Are your debts primarily busine money for a business or investme			
				☐ No. Go to line 16c.			
				☐ Yes. Go to line 17.			
			16c.	State the type of debts you owe the	hat are not consumer debts of	or business o	debts
17.		you filing under oter 7?	■ No.	I am not filing under Chapter 7. G	to to line 18.		
	after	ou estimate that any exempt erty is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab			ry is excluded and administrative expenses
	admi	inistrative expenses		□No			
	be av	paid that funds will vailable for ibution to unsecured itors?		☐ Yes			
18.		many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000
	you o	estimate that you ?	□ 50-99		☐ 5001-10,000 ☐ 40,004,05,000		□ 50,001-100,000
			☐ 100-19 ☐ 200-9		☐ 10,001-25,000		☐ More than100,000
19.		much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 millio	on	☐ \$500,000,001 - \$1 billion
		nate your assets to orth?		01 - \$100,000	□ \$10,000,001 - \$50 mil		□ \$1,000,000,001 - \$10 billion
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.		much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 millio	on	☐ \$500,000,001 - \$1 billion
	estin	nate your liabilities e?	_	01 - \$100,000	□ \$10,000,001 - \$50 mil		\$1,000,000,001 - \$10 billion
			_ ' '	001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 mi □ \$100,000,001 - \$500 m		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Part	t 7:	Sign Below					
For	you		I have ex	amined this petition, and I declare	under penalty of perjury that	t the informat	tion provided is true and correct.
				chosen to file under Chapter 7, I ar tates Code. I understand the relief			nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.
				rney represents me and I did not p tt, I have obtained and read the no			n attorney to help me fill out this
			I request	relief in accordance with the chapt	ter of title 11, United States 0	Code, specifi	ed in this petition.
				cy case can result in fines up to \$2			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,
				Lamont Keen amont Keen		nda Stone l Stone Kee	Keen Keen
				e of Debtor 1		e of Debtor 2	
			Executed	February 19, 2016  MM / DD / YYYY	Executed		DD / YYYY

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 7 of 56

Debtor 1 Mark Lamont Kee Rhonda Stone Ke		_ Ca	se number (if known)
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	under Chapter 7, 11, 12, or 13 of title 11, United St	ates Code, and have have delivered to the	debtor(s) the notice required by 11 U.S.C. § 342(b)
to me and page.	/s/ Mark M. Harris Signature of Attorney for Debtor	Date	February 19, 2016
	Mark M. Harris Printed name  Smith Dickey Dempster Carpenter & Harri Firm name  309 Person Street Fayetteville, NC 28302  Number, Street, City, State & ZIP Code	is	

Email address

Contact phone **910-484-8195** 

Bar number & State

Mark@smithdickey.com

				9	
Fill ir	n this informa	ation to identify your case:			
Debte	or 1	Mark Lamont Keen First Name Last Name			
Debto	or 2	First Name Middle Name Last Name  Rhonda Stone Keen Keen			
(Spous	se if, filing)	First Name Middle Name Last Name			
Unite	d States Bank	kruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA			
Case	number				
(if knov	wn)				k if this is an
				amen	ded filing
Oπ:	alal Eam	4000			
		m 106Sum			4044
		Your Assets and Liabilities and Certain Statistical Information accurate as possible. If two married people are filing together, both are equally responsible for	or su		12/15
inforn	nation. Fill oເ	ut all of your schedules first; then complete the information on this form. If you are filing amend			
	<u> </u>	s, you must fill out a new <i>Summary</i> and check the box at the top of this page.			
Part '	1: Summa	rize Your Assets			
					ssets of what you own
	0	D. D (0% : 1.5	V	alue (	or what you own
		<b>3: Property</b> (Official Form 106A/B) 55, Total real estate, from Schedule A/B		\$	82,500.00
	1b. Copy line	62, Total personal property, from Schedule A/B	;	\$	31,233.32
	1c. Copy line	63, Total of all property on Schedule A/B		\$	113,733.32
Part 2	2: Summai	rize Your Liabilities			
			Y	our li	abilities
					t you owe
		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		\$	114,728.64
		: Creditors Who Have Unsecured Claims (Official Form 106E/F)			
		total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	!	\$	0.00
	3b. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	!	\$	14,923.51
		Your total liabilities	\$_		129,652.15
Part 3	3: Summa	rize Your Income and Expenses			
4.	Schedule I: Y	our Income (Official Form 106I)			
		mbined monthly income from line 12 of Schedule I	;	\$	3,487.61
		Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J	:	\$	3,484.00
Part 4	4: Answer	These Questions for Administrative and Statistical Records			
6.	Are you filing	g for bankruptcy under Chapters 7, 11, or 13?			
		have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur oth	ner sc	hedules.
	■ Yes				
7.		debt do you have?			
		bts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a pei	rsonal	, family, or
	househo	old purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.			

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

#### Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 9 of 56

Jeptor 2	Rhonda Stone Keen Keen	Case number (if known)	
	n the <i>Statement of Your Current Monthly Income</i> : Cop A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 L		\$ 3,816.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Mark Lamont Keen

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

#### Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 10 of 56

	<b>Cumberland</b> County			□ □ □ Othe	Debtor 1 and Debtor 2 only	☐ Check (see inst	if this is com	munit	y property
	City	NC State	<b>28306-0000</b> ZIP Code		Investment property Timeshare Other	Describe th	2,500.00 ne nature of you	our ow	\$82,500.0 ynership interest y the entireties, o
1.1	3557 Gainey Street address, if ava		scription		Duplex or multi-unit building	the amount	of any secured Tho Have Clain	d claim ns Sec	exemptions. Put s on Schedule D: ured by Property.
•	No. Go to Part 2. Yes. Where is the	, ,	quitable interest in a		dence, building, land, or similar property?				
SC n eac hink nforr	it fits best. Be as mation. If more sp er every question	A/B: Plantely list and do complete and ace is needed,	roperty lescribe items. List a accurate as possible attach a separate sh	e. If two neet to t	t only once. If an asset fits in more than on o married people are filing together, both ar his form. On the top of any additional page I Estate You Own or Have an Interest In	e equally respo	nsible for su	pplyin	g correct
Cas	e number								Check if this is a amended filing
(Spot		First Name	ne Keen Keen  Middle  the: EASTERN		Last Name ICT OF NORTH CAROLINA				
Dah			ivildule	ivame	Last Name				
	_	Mark Lamor First Name	nt Keen Middle	Nama					

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 11 of 56

Debto		thonda Stone Keen Keen		Case number (if known)		
. Ca	rs, vans,	trucks, tractors, sport utility ve	ehicles, motorcycles			
	do.					
■、						
	103					
3.1	Make:	Jeep	Who has an interest in the property? Check one	Do not deduct secured cl		
	Model:	Liberty	☐ Debtor 1 only	the amount of any secure Creditors Who Have Clair		
	Year:	2008	☐ Debtor 2 only	Current value of the	Current value of the	
	Approxir	mate mileage: 120000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		formation:	$\square$ At least one of the debtors and another			
	no sun 910 Cr	ase package cloth seats broof amdown eligible value \$8825.00	☐ Check if this is community property (see instructions)	\$8,825.00	\$8,825.00	
2.2	Make	Ford	Who has an interest in the preparty? Observe	Do not deduct secured cl	aims or exemptions. Put	
3.2	Make: Model:	F-150	Who has an interest in the property? Check one  Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:	
	Year:	2007	Debtor 2 only		, , ,	
	Approxin	mate mileage: 125000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other information:				,	
	125k m			40.000.00	40.000 50	
	NADA \$9922.	value \$11,025-10%=	Check if this is community property (see instructions)	\$9,922.50	\$9,922.50	
•	⁄es					
4.1	Make:	Polaris	Who has an interest in the property? Check one	Do not deduct secured cluthe amount of any secure		
	Model:	Sportsman 90	☐ Debtor 1 only	Creditors Who Have Clair		
	Year:	2010	☐ Debtor 2 only	Current value of the	Current value of the	
		■ Debtor 1 and Debtor 2 only		entire property?	portion you own?	
	Other inf	formation:	At least one of the debtors and another		¢005.00	
	recrea	tional vehicle	☐ Check if this is community property (see instructions)	\$905.00	\$905.00	
4.2	Make:	Polaris	Who has an interest in the property? Check one	Do not deduct secured cl		
	Model:	Sportsman 500	☐ Debtor 1 only	the amount of any secure Creditors Who Have Clair		
	Year:	2006	Debtor 2 only		, , ,	
			■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other inf	formation:	☐ At least one of the debtors and another			
		Blue Book Value \$2000 - \$1800.00	☐ Check if this is community property (see instructions)	\$1,800.00	\$1,800.00	
4.3	Make:	Polaris	Who has an interest in the property? Check one	Do not deduct secured cl	aims or exemptions. Put	
	Model	Hawkeye 300	☐ Debtor 1 only	the amount of any secure	d claims on Schedule D:	
	Model: Year:	2007	Debtor 1 only Debtor 2 only	Creditors Who Have Clair		
	. 541.		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other inf	■ Debtor 1 and Debtor 2 only  Information:   At least one of the debtors and another		ontain property i	polition you omili	
		Blue Book \$1865-10%=	☐ Check if this is community property	\$1,678.50	\$1,678.50	
	\$1678.		(see instructions)			

	Debtor 1 Debtor 2	Mark Lamon Rhonda Sto	t Keen ne Keen Keen	Case nu	mber (if known)	
5			the portion you own for all of your entred for Part 2. Write that number here			\$23,131.00
В	art 2: Dog	scriba Vaur Barsa	nal and Household Items			
			egal or equitable interest in any of the fo	ollowing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	old goods and f es: Major applian Describe	urnishings ces, furniture, linens, china, kitchenware			dame of exemptions.
			household goods including bedr kitchen set	oom sets, living room set,		\$750.00
7.	■ No	es: Televisions a	nd radios; audio, video, stereo, and digital phones, cameras, media players, games	equipment; computers, printers, sca	anners; music colle	ctions; electronic devices
8.	Example  No		figurines; paintings, prints, or other artworons, memorabilia, collectibles	k; books, pictures, or other art objec	ets; stamp, coin, or	baseball card collections;
9.	Example  No	ent for sports ares: Sports, photo musical instru	graphic, exercise, and other hobby equipn	nent; bicycles, pool tables, golf club	s, skis; canoes and	kayaks; carpentry tools;
10	■ No		s, shotguns, ammunition, and related equip	pment		
11	□ No		othes, furs, leather coats, designer wear, s	hoes, accessories		
_			casual and dress clothing for two	adults and two minor childre	en	\$400.00
12	■ No		welry, costume jewelry, engagement rings,	wedding rings, heirloom jewelry, w	atches, gems, gold	silver
13	Examp  ■ No	rm animals  bles: Dogs, cats,  Describe	birds, horses			
14	I. <b>Any otl</b> □ No		d household items you did not already	ist, including any health aids yoເ	ı did not list	

# Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 13 of 56

Debtor 1 Debtor 2	Mark Lamon Rhonda Stor		Keen		Case nur	mber <i>(if known)</i>	
		persor	nal pictures,Cl	D's, mo	vies		\$100.00
					including any entries for pages you have	e attached	\$1,250.00
Part 4: D	escribe Your Financ	cial Assets	5				
Do you o	wn or have any le	egal or ed	quitable interes	t in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	nples: Money you h		-		n a safe deposit box, and on hand when you	ı file your petition	
Exan □ No	institutions.	0 /			certificates of deposit; shares in credit union the same institution, list each.	ns, brokerage ho	uses, and other similar
Yes					Institution name:		
		17.1.	Checking		Federal Credit Union Checking account		\$500.00
		17.2.	Savings		Federal credit Union		\$25.00
<i>Exan</i> ■ No	s, mutual funds, on ples: Bond funds,	investme		brokera	ge firms, money market accounts		
19. <b>Non-</b> p		ock and i	nterests in inco	rporate	and unincorporated businesses, includ	ing an interest i	n an LLC, partnership, and
■ No	venture						
_	. Give specific info		about them ne of entity:		% of ow	nership:	
Nego Non-	tiable instruments	include p	ersonal checks,	cashiers	e and non-negotiable instruments checks, promissory notes, and money orde to someone by signing or delivering them.	ers.	
■ No □ Yes	. Give specific info		about them er name:				
21. <b>Retire</b> <i>Exan</i> □ No	ement or pension apples: Interests in I	accounts RA, ERIS	<b>s</b> A, Keogh, 401(k	i), 403(b)	thrift savings accounts, or other pension or	profit-sharing pla	ans
■ Yes	. List each accoun		ely. of account:		Institution name:		
		Thrift	Saving		Valic-SouthEastern Regional Medic	cal center	\$1,203.32

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 14 of 56

Debtor 1 Debtor 2	Mark Lamont Keen Rhonda Stone Keen Keen		С	ase number (if known)	
Yours		ave made so that you may continue prepaid rent, public utilities (electric,			others
■ No □ Yes.		Institution name	or individual:		
23. Annui	ties (A contract for a periodic payr	ment of money to you, either for life	or for a number of y	years)	
■ No	, , ,		ĺ	,	
☐ Yes.	Issuer name and d	escription.			
	sts in an education IRA, in an ac .C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program 9(b)(1).	n, or under a qual	ified state tuition program.	
	Institution name ar	nd description. Separately file the re	cords of any interes	sts.11 U.S.C. § 521(c):	
25. Trusts	s, equitable or future interests in	property (other than anything lis	ted in line 1), and	rights or powers exercisable	e for your benefit
☐ Yes.	Give specific information about the	nem			
		e secrets, and other intellectual prosites, proceeds from royalties and li		s	
☐ Yes.	Give specific information about the	nem			
	ses, franchises, and other gener ples: Building permits, exclusive li	al intangibles censes, cooperative association hol	dings, liquor license	es, professional licenses	
_	Give specific information about the	nem			
Money or	property owed to you?			<b>pc</b> Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
	funds owed to you				
□ No ■ Yes.	Give specific information about the	em, including whether you already	iled the returns and	d the tax years	
	·			ŕ	
		Federal return		Federal	\$5,100.00
		State return		State	\$24.00
		Otate return		State	Ψ24.00
29. <b>Family</b> Exam		ny, spousal support, child support, n	naintenance, divorc	e settlement, property settlem	ent
☐ Yes.	Give specific information				
	amounts someone owes you ples: Unpaid wages, disability insu benefits; unpaid loans you m	rance payments, disability benefits, ade to someone else	sick pay, vacation	pay, workers' compensation,	Social Security
■ No □ Yes.	Give specific information				
Exam	sts in insurance policies ples: Health, disability, or life insur	ance; health savings account (HSA	); credit, homeowne	er's, or renter's insurance	
■ No □ Yes.	Name the insurance company of	each policy and list its value			
Official For		Schedule A/B: Prope	erty		page 5

Software Copyright (c) 1996-2016 Best Case, LLC - www.bestcase.com

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 15 of 56

Debtor 1 Debtor 2	Mark Lamont Keen Rhonda Stone Keen Keen	Case number (if known)	
	Company name:	Beneficiary:	Surrender or refund value:
If you somed	aterest in property that is due you from someone who hat are the beneficiary of a living trust, expect proceeds from a one has died.  Give specific information		eive property because
Exam ■ No	s against third parties, whether or not you have filed a la ples: Accidents, employment disputes, insurance claims, or Describe each claim		
■ No	contingent and unliquidated claims of every nature, incl  Describe each claim	luding counterclaims of the debtor and rights to	set off claims
■ No	nancial assets you did not already list  Give specific information		
	the dollar value of all of your entries from Part 4, includitart 4. Write that number here		\$6,852.32
Part 5: De	escribe Any Business-Related Property You Own or Have an Inte	erest In. List any real estate in Part 1.	
No. G	own or have any legal or equitable interest in any business-rela o to Part 6. Go to line 38.	ated property?	
	escribe Any Farm- and Commercial Fishing-Related Property Yo you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interest In.	
■ No.	u own or have any legal or equitable interest in any farm . Go to Part 7. s. Go to line 47.	n- or commercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above	
Exam <sub>i</sub> ■ No	u have other property of any kind you did not already lis ples: Season tickets, country club membership  Give specific information	t?	
54. <b>Add</b>	the dollar value of all of your entries from Part 7. Write t	hat number here	\$0.00

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 16 of 56

	tor 2 Rhonda Stone Keen Keen		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$82,500.00
56.	Part 2: Total vehicles, line 5	\$23,131.00		
57.	Part 3: Total personal and household items, line 15	\$1,250.00		
58.	Part 4: Total financial assets, line 36	\$6,852.32		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$31,233.32	Copy personal property total	\$31,233.32
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$113,733.32

Fill in this information to identify your case:								
Debtor 1								
	First Name	Middle Name	Last Name					
Debtor 2	Rhonda Stone Ke	en Keen						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	F NORTH CAROLINA					
Case number								
(if known)					Check if this is an			
					amended filing			

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
,	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2006 Polaris Sportsman 500 Kelley Blue Book Value \$2000 - 10%=	\$1,800.00		\$1,800.00	N.C. Gen. Stat. § 1C-1601(a)(2)	
\$1800.00 Line from <i>Schedule A/B</i> : <b>4.2</b>			100% of fair market value, up to any applicable statutory limit	\-/\-/	
2007 Polaris Hawkeye 300 Kelley Blue Book \$1865-10%=	\$1,678.50		\$1,678.50	N.C. Gen. Stat. § 1C-1601(a)(2)	
\$1678.50 Line from <i>Schedule A/B</i> : <b>4.3</b>			100% of fair market value, up to any applicable statutory limit		
household goods including bedroom sets, living room set,	\$750.00	•	\$750.00	N.C. Gen. Stat. § 1C-1601(a)(4)	
kitchen set Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
casual and dress clothing for two	\$400.00		\$400.00	N.C. Gen. Stat. § 1C-1601(a)(4)	
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
personal pictures,CD's, movies	\$100.00		\$100.00	N.C. Gen. Stat. § 1C-1601(a)(2)	
Enterior Contodate / V.D. Till			100% of fair market value, up to any applicable statutory limit		

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 18 of 56

	btor 1 btor 2	Mark Lamont Keen Rhonda Stone Keen Keen			Case number (if known)		
		description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
		cking: Federal Credit Union cking account	\$500.00		\$500.00	N.C. Gen. Stat. § 1-362	
		from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
		ings: Federal credit Union from Schedule A/B: 17.2	\$25.00		\$25.00	N.C. Gen. Stat. § 1-362	
<u> </u>	LINE	Hom Schedule A.B. 1112			100% of fair market value, up to any applicable statutory limit		
		ft Saving: Valic-SouthEastern ional Medical center	\$1,203.32		\$1,203.32	N.C. Gen. Stat. § 1C-1601(a)(9)	
ta	tax	deferred savings plan from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
		eral: Federal return	\$5,100.00		\$5,100.00	N.C. Gen. Stat. § 1C-1601(a)(2)	
	LINE	Tioni Schedule A.B. 25.1			100% of fair market value, up to any applicable statutory limit		
		e: State return	\$24.00		\$24.00	N.C. Gen. Stat. § 1C-1601(a)(2)	
	LINE	Hom Schedule A/B. 20.2			100% of fair market value, up to any applicable statutory limit		
3.		you claiming a homestead exemptio ject to adjustment on 4/01/16 and ever			iled on or after the date of adjustmer	nt.)	
		No					
		Yes. Did you acquire the property cover	ered by the exemption wi	ithin 1	,215 days before you filed this case	?	
		□ No					
		☐ Yes					

#### Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 19 of 56

Rev. 12/2009

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF:
Mark Lamont Keen
Rhonda Stone Keen Keen
Debtor(s).

CASE NUMBER:

#### SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Mark Lamont Keen and Rhonda Stone Keen Keen</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	( * * / * * * * * *	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
Debtor's Age: Name of former co-owne	r:					
	V	ALUE OF REA	AL ESTATE CLAIMED A	S EXEMPT PURSU	ANT TO NCGS 1	C-1601(a)(1): \$ 0.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (H)Husband (W)Wife (J)Joint	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
-NONE-						

#### VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is <u>2</u>.

Description of Property	Market <u>Value</u>	Owner (H)Husband (W)Wife (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
casual and dress clothing for two adults and two minor children	400.00	J			400.00	400.00
household goods including bedroom sets, living room set, kitchen set	750.00	J			750.00	750.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 1,150.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>	Owner (H)Husband (W)Wife (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(5)
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)	Cash Value
-NONE-	

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

Description	
-NONE-	

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity -NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (H)Husband (W)Wife (J)Joint	Lien <u>Holder</u>	Amount <u>of Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
2006 Polaris Sportsman 500 Kelley Blue Book Value \$2000 - 10%= \$1800.00	1,800.00	J			1,800.00	1,800.00
2007 Polaris Hawkeye 300 Kelley Blue Book \$1865-10%= \$1678.50	1,678.50	J			1,678.50	1,678.50
Federal: Federal return	5,100.00	J			5,100.00	5,100.00
personal pictures,CD's, movies	100.00	J			100.00	100.00
State: State return	24.00	J			24.00	24.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 8,702.50

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number

Thrift Saving: Valic-SouthEastern Regional Medical center tax deferred savings plan

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number
-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONF-	
-NONE-	i

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	
a.	§ 1-362	500.00
	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	_
b.	§ 1-362	25.00

16. FEDERAL PENSION FUND EXEMPTIONS

	-NONE-	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

-NONE-	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market	Lien	Amount	Net
	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

	Nature of	Amount of	Description of	Value	Net
<u>Claimant</u>	Claim	Claim	Property	of Property	<u>Value</u>
			2007 Ford F-150 125000		
			miles		
			125k miles		
	Purchase Money		NADA value		
GM Financial	Security Interest	15,268.00	\$11,025-10%= \$9922.50	9,922.50	0.00
			2008 Jeep Liberty 120000		
			miles		
			2wd base package cloth		
			seats no sunroof		
	Purchase Money		910 Cramdown eligible		
Ally Financial	Security Interest	9,010.00	NADA value \$8825.00	8,825.00	0.00
			2010 Polaris Sportsman		
Capital One Retail	Purchase Money		90		
Services	Security Interest	1,059.64	recreational vehicle	905.00	0.00
			3557 Gainey Road		
			Fayetteville, NC 28306		
Wells Fargo	First Mortgage	89,391.00		82,500.00	0.00

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

# UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Mark Lamont Keen and Rhonda Stone Keen Keen</u>, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: February 19, 2016	/s/ Mark Lamont Keen
	Mark Lamont Keen
	Debtor
	/s/ Rhonda Stone Keen Keen
	Rhonda Stone Keen Keen
	Joint Debtor

Fill in this inform	nation to identify you	r case:			
Debtor 1	Mark Lamont Ke	een			
	First Name	Middle Name Last Nan	ne	-	
Debtor 2 (Spouse if, filing)	Rhonda Stone K	Keen Keen  Middle Name  Last Nam	20	-	
(Spouse II, IIIIIIg)	i iist ivailie				
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF NORTH CAR	OLINA	-	
Case number					
(if known)				☐ Check	if this is an
				amend	ed filing
Official Forn	106D				
	<del></del>	Mha Hara Claima Caar	ned by Dreseart		
Schedule	D: Creditors	Who Have Claims Secu	rea by Propert	<u>y</u>	12/15
		f two married people are filing together, both a out, number the entries, and attach it to this for			
, ,	have claims secured by	your property?			
☐ No. Check	this box and submit th	nis form to the court with your other schedule	es. You have nothing else	to report on this form.	
_	all of the information b	•	<b>3</b>	•	
	Il Secured Claims	5616W.			
		nore than one accuract claim list the graditar cone	Column A	Column B	Column C
for each claim. If m	ore than one creditor has	nore than one secured claim, list the creditor sepa a particular claim, list the other creditors in Part 2	. As Amount of claim	Value of collateral	Unsecured
much as possible, li	ist the claims in alphabetic	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally Finar	ncial	Describe the property that secures the claim:		\$8,825.00	\$185.00
Creditor's Name	9	2008 Jeep Liberty 120000 miles			
		2wd base package cloth seats no sunroof			
A44m. Off:		910 Cramdown eligible			
Attn: Offic	cer se Box 380901	NADA value \$8825.00			
Minneapo		As of the date you file, the claim is: Check all th apply.	at		
55438-090	)1 ်	☐ Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only			or secured		
_ ′	-h4 0h	☐ Statutory lien (such as tax lien, mechanic's lie	an)		
Debtor 1 and De	eptor 2 only he debtors and another	☐ Judgment lien from a lawsuit	511)		
☐ Check if this cl		•	ase Money Security Int	terest	
community de		— Other (including a right to onset)	,,		
Date debt was inco	urred 10/16/2012	Last 4 digits of account number XX	xxx		
Capital O	ne Retail				
Services		Describe the property that secures the claim:	\$1,059.64	\$905.00	\$154.64
Creditor's Name		2010 Polaris Sportsman 90			
Attn: Offic		recreational vehicle			
Departme Carol Stre		As of the date you file, the claim is: Check all the	at		
60116-768		apply.  Contingent			
Number, Street	, City, State & Zip Code	☐ Unliquidated			
	•	☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage	or secured		
Debtor 2 only		car loan)			
Debtor 1 and De	•	☐ Statutory lien (such as tax lien, mechanic's lie	en)		
□ At least one of the state of the	he debtors and another	☐ Judgment lien from a lawsuit			

#### Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 24 of 56

Debtor 1			_	Case number (if know)		
	First Name Middle N					
Debtor 2						
	First Name Middle N	lame Last Name				
	if this claim relates to a nunity debt	Other (including a right to offset)	Purchase I	Money Security Interes	t	
Date debt	was incurred	Last 4 digits of account num	1934 description			
2.3 <b>GN</b>	l Financial	Describe the property that secures	the claim:	\$15,268.00	\$9,922.50	\$5,345.50
Crec	litor's Name	2007 Ford F-150 125000 mil 125k miles NADA value \$11,025-10%=	\$9922.50			
	n:officer Box 78143	As of the date you file, the claim is: apply.  Contingent	. Crieck all triat			
Num	ber, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owe	es the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor	•	☐ An agreement you made (such as car loan)	mortgage or sec	cured		
■ Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At leas	t one of the debtors and another	☐ Judgment lien from a lawsuit				
	if this claim relates to a nunity debt	Other (including a right to offset)	Purchase I	Money Security Interes	t	
Date debt	was incurred <u>09/26/2014</u>	Last 4 digits of account num	7193			
	ells Fargo	Describe the property that secures	the claim:	\$89,391.00	\$82,500.00	\$6,891.00
Cred	litor's Name	3557 Gainey Road Fayettev 28306 Cumberland County				
PO	n: Managing Agent Box 10335	As of the date you file, the claim is: apply.	Check all that			
De	s Moines, IA 50306	☐ Contingent				
Num	ber, Street, City, State & Zip Code	Unliquidated				
Who owe	es the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
Debtor		☐ An agreement you made (such as		nura d		
☐ Debtor		car loan)	mortgage or set	curea		
_	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
	et one of the debtors and another	☐ Judgment lien from a lawsuit	·			
☐ Check	if this claim relates to a nunity debt	Other (including a right to offset)	First Mortg	age		
Date debt	was incurred <u>03/05/2012</u>	Last 4 digits of account num	nber XXXX			
Add the	dollar value of your entries in C	Column A on this page. Write that nun	nber here:	\$114,728.64		
	the last page of your form, add at number here:	the dollar value totals from all pages		\$114,728.64	ı	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

					ı	
Fil	I in this inforn	nation to identify your case:				
De	ebtor 1	Mark Lamont Keen				
			iddle Name Last Name			
1 -	ebtor 2	Rhonda Stone Keen Kee				
(Sp	ouse if, filing)	First Name Mi	iddle Name Last Name			
Ur	nited States Ba	nkruptcy Court for the: EASTE	ERN DISTRICT OF NORTH CAROLINA			
Ca	se number					
	(nown)				_	if this is an led filing
f	ficial Form	106E/E				
			ave Unsecured Claims			12/15
Sch Sch left.	edule G: Execu edule D: Credit	tory Contracts and Unexpired Leas ors Who Have Claims Secured by P tinuation Page to this page. If you I	d result in a claim. Also list executory contract es (Official Form 106G). Do not include any cre troperty. If more space is needed, copy the Part have no information to report in a Part, do not f	ditors with partially s you need, fill it out,	secured claims that a number the entries in	re listed in n the boxes on the
Pa	rt 1: List Al	I of Your PRIORITY Unsecured	l Claims			
1.	Do any credito	ors have priority unsecured claims	against you?			
	☐ No. Go to P	art 2.				
	Yes.					
2.	identify what typ possible, list the	be of claim it is. If a claim has both pri	ditor has more than one priority unsecured claim, list ority and nonpriority amounts, list that claim here a ng to the creditor's name. If you have more than twaim, list the other creditors in Part 3.	nd show both priority a	and nonpriority amoun	ts. As much as
	(For an explana	ation of each type of claim, see the ins	structions for this form in the instruction booklet.)	Total claim	Priority	Nonpriority
				Total Claim	amount	amount
2.1		land County Tax Collector	Last 4 digits of account number	Unknown	\$0.00	\$0.00
		editor's Name	When was the debt incurred?			
	Attn: Of	fice Box 1829	when was the dept incurred?		-	
		ville, NC 28302				
		treet City State Zlp Code	As of the date you file, the claim is: Check a	all that apply		
	Who incurred	d the debt? Check one.	☐ Contingent			
	Debtor 1 o	only	☐ Unliquidated			
	Debtor 2 o	nly	Disputed			
	■ Debtor 1 a	and Debtor 2 only	Type of PRIORITY unsecured claim:			
	_	e of the debtors and another	☐ Domestic support obligations			
	_	his claim is for a community debt	■ Taxes and certain other debts you owe the	government		
		subject to offset?	☐ Claims for death or personal injury while yo	•		
	■ No		☐ Other. Specify			
			· · ·			

☐ Yes

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 26 of 56

	btor 1 Mark Lamont Keen btor 2 Rhonda Stone Keen Keen	Case	e number (if know)		
2.2	Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number	Unknown	\$0.00	\$0.00
	Attn: Officer	When was the debt incurred?			
	Post Office Box 7346				
	Philadelphia, PA 19101  Number Street City State Zlp Code	As of the date you file, the claim is: Check	all that apply		
	Who incurred the debt? Check one.	☐ Contingent	t all triat apply		
	Debtor 1 only	_			
	Debtor 2 only	☐ Unliquidated			
	_	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	$\square$ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe th	ne government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while y			
	No	☐ Other. Specify			
	☐ Yes	Possible Obligation	on - Federal Tax		
2.3	North Carolina Dept. of Revenue Priority Creditor's Name	Last 4 digits of account number	Unknown	\$0.00	\$0.00
	Attn: Managing Agent PO Box 25000	When was the debt incurred?			
	Raleigh, NC 27640				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check	all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe th	ao government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while y			
	No		you were intoxicated		
	□ Yes	Other. Specify Possible Obligation	on - State Tax		
_		-			
	rt 2: List All of Your NONPRIORITY Unsecu				
3.		•			
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	■ Yes.				
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify what type of	claim it is. Do not list claims al	ready included in Part	1. If more

Total claim

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 27 of 56

	or 2 Rhonda Stone Keen Keen	Case number (if know)	
4.1	Advanced Home Care	Last 4 digits of account number 1675	\$765.00
	Nonpriority Creditor's Name Attn:officer PO Box 580089	When was the debt incurred?	·
	Charlotte, NC 28258  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Medical Expenses	
4.2	Calvary SPV,LLc Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$2,435.00
	Attn:officer 500 Summitt Lake Drive STE 400	When was the debt incurred?	
	Valhalla, NY 10595  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for Capital One	
4.3	Carolina Imaging Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	Attn: Managing Agent 3628 Cape Center Drive	When was the debt incurred?	
	Fayetteville, NC 28304  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	ne of the date yearner, and training of one of the date apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Expenses	

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 28 of 56

Debto	Rhonda Stone Keen Keen	Case number (if know)	
4.4	Credit Bureau Systems	Last 4 digits of account number	\$150.00
	Nonpriority Creditor's Name Attn: Managing Agent PO Box 482	When was the debt incurred?	
	Clarksville, TN 37040  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify	
4.5	Duke University Hospital Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	Attn: Managing Agent PO Box 91040	When was the debt incurred?	
	Durham, NC 27708  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Expenses	
	Li Tes	Other. Specify Wedled Experises	
4.6	IC Systems Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$125.00
	Attn:officer 444 Highway 96 East	When was the debt incurred?	
	Saint Paul, MN 55127  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection for SouthEastern Dermatology	

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 29 of 56

Debtor Debtor	Mark Lamont Keen Rhonda Stone Keen Keen	Case number (if know)		
4.7	Midland Funding C/O Sessoms & Rogers	Last 4 digits of account number D162	\$6,622.11	
	Nonpriority Creditor's Name Attn:officer PO Box110564 Durham, NC 27709	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	·	Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Judgment for Citibank(Sears)		
4.8	Midland Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number xxxx	\$1,307.00	
	Attn: Officer 8875 Aero Drive San Diego, CA 92123	When was the debt incurred? 10/29/14		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Collection		
4.9	Midland Funding,LLC  Nonpriority Creditor's Name	Last 4 digits of account number	\$318.00	
	2365 Northside Drive Attn:officer Ate 300	When was the debt incurred?		
	San Diego, CA 92108  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	П		
	Debtor 2 only	Contingent		
	_	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other Specify Collection for GE retail Bank		
		— Other, openity		

Official Form 106 E/F

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 30 of 56

	2 Rhonda Stone Keen Keen	Case number (if know)	
4.1	SCA Collections Inc	Last 4 digits of account number 31xx	\$100.00
0	Nonpriority Creditor's Name Attn: Officer 300 E Arlington Blvd, Ste 6-A	When was the debt incurred?	<b>V.000.00</b>
	Greenville, NC 27858-5016  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for medical-Wayne Radiologists	
4.1	Southeastern Regional Medical		
1	Center	Last 4 digits of account number 9604	\$440.40
	Nonpriority Creditor's Name 300 W. 27th Street	When was the debt incurred?	
	Attn:officer		
	Lumberton, NC 28358		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поле	
	Debtor 2 only	☐ Contingent	
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Expenses	
4.1			
2	Southeastern Spine Pain Clinic	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name Attn:officer 106 Farm Brook Drive	When was the debt incurred?	
	Ste. A		
	Lumberton, NC 28358  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another		
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Expenses	
		• • —	

Official Form 106 E/F

# Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 31 of 56

Debtor :	Mark Lamont Keen Rhonda Stone Keen Keen	Case number (if know)		
4.1	Sprint	Lock A digito of account number		\$1,000.00
3 _	Nonpriority Creditor's Name Attn: Manging Agent PO Box 105243	Last 4 digits of account number When was the debt incurred?	2015	Ψ1,000.00
-	Atlanta, GA 30348  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Bill	
4.1	Syncb/Walmart	Last 4 digits of account number	хххх	\$1,012.00
	Nonpriority Creditor's Name Attn:officer PO Box 965036	When was the debt incurred?	12/19/2012	
	Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	7.0 0 44.0 , 44 , 4 0.4	C. C	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other Specify Charge-Off		
4.1	Syncb/walmart	Last 4 digits of account number	xxxx	\$149.00
	Nonpriority Creditor's Name Attn;officer PO Box 965024	When was the debt incurred?		
-	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Charge-Off		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1	Mark Lamont Keen		
Debtor 2	Rhonda Stone Keen Keen	Case number (if know)	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				_
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
nom ran 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 14,923.51
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 14,923.51

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this inform					
Debtor 1	Mark Lamont Kee	en			
	First Name	Middle Name	Last Name		
Debtor 2	Rhonda Stone Ke	en Keen			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	EASTERN DISTRICT C	PF NORTH CAROLINA		
Case number					<b>–</b> 01 1 7 7 1 1 1
(if known)					Check if this is an amended filing

#### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Olate	Zii Oodc	
0	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	Oity		Otate	ZII COUE	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 34 of 56

					· ·
Fill in this i	nformation to identify your	case:			
Debtor 1	Mark Lamont Kee				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2	Rhonda Stone Ke				
(Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	OF NORTH CAROLINA		
Case number	er				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ıle H: Your Cod	obtore			40/45
Scrieut	ale n. Tour Cou	enroi 2			12/15
your name a	d number the entries in the and case number (if known) ou have any codebtors? (If	. Answer every question	i.	. •	o of any Additional Pages, write
_	• (	, , ,	·		
■ No					
☐ Yes					
	in the last 8 years, have you , California, Idaho, Louisiana				states and territories include
■ No. C	Go to line 3.				
☐ Yes.	Did your spouse, former spor	use, or legal equivalent liv	e with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarar	ntor or cosigner. Make	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
2.4				Cabadula D line	
3.1 N	ame				
				☐ Schedule G, line	
N	umber Street				
	ity	State	ZIP Code		
3.2				□ Sobodulo D. line	
	ame			_ ☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
N	umber Street			_	
	ity	State	ZIP Code		

Fill in this informat	ion to identify your case:	
Debtor 1	Mark Lamont Keen	_
Debtor 2 (Spouse, if filing)	Rhonda Stone Keen Keen	
United States Bank	kruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA	-
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapte
Official For	rm 106l	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Fundament status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Contractor	Sales
	Include part-time, seasonal, or self-employed work.	Employer's name	Dupont	Family Medical Supply
	Occupation may include student or homemaker, if it applies.	Employer's address	On Board PMO Corporation 50 Millstone Road Hightstown, NJ 08520	1637 Owen Drive Fayetteville, NC 28304

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 2,315

3. Estimate and list monthly overtime pay.

3. +\$ 352

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 2,668.29

2. \$ 2,315.73 \$ 1,820.00

3. +\$ 352.56 +\$ 0.00

4. \$ 2,668.29 \$ 1,820.00

For Debtor 1

For Debtor 2 or

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1 tor 2	Mark Lamont Keen Rhonda Stone Keen Keen			Case r	number ( <i>if k</i>	nown)	) _				
					For	Debtor 1			For Debtor			
	Сор	y line 4 here	4.		\$	2,66	8.29	)		,820.		
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	420	0.44	ı	\$	322.	.34	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	_	\$		.00	
	5c.	Voluntary contributions for retirement plans	5c	<b>:</b> .	\$		0.00	_	\$		.00	
	5d.	Required repayments of retirement fund loans	5d	i.	\$		0.00		\$		.00	
	5e.	Insurance	5e	<del>)</del> .	\$	164	4.00	)	\$	0.	.00	
	5f.	Domestic support obligations	5f.		\$		0.00	)	\$	0.	.00	
	5g.	Union dues	5g	J.	\$		0.00	)	\$	0.	.00	
	5h.	Other deductions. Specify: term life	_ 5h	1.+	\$	;	3.90	+	\$	0.	.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	678	8.34	<u> </u>	\$	322.	.34	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,989	9.95	<u> </u>	\$1	,497.	.66	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0.0		Ф				<b>r</b>		00	
	8b.	monthly net income. Interest and dividends	8a 8b		\$		0.00 0.00	_	\$		.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$ \$		0.00	·	\$\$		.00	
	8d.	Unemployment compensation	8d	i.	\$		0.00	)	\$	0.	.00	
	8e.	Social Security	8e	<del>)</del> .	\$		0.00	)	\$	0.	.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	_	\$		.00	
	8g.	Pension or retirement income	89		\$		0.00	_	\$		.00	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$		0.00	_ +	\$	0.	.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00		\$	(	0.00	
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	1	,989.95	+ 5	\$	1,497.66	= \$		3,487.61
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		·-		.,	1 L		.,	j Ľ		,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		•	•			I in <i>Schedul</i>	le J. +\$		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies									nbine	
13.	Do y	you expect an increase or decrease within the year after you file this form?	?							mor	nthly	income
		Yes. Explain:										

ΕiII	in this informa	ation to identify yo	our case.					
	otor 1	Mark Lamon				Che	eck if this is:	
		Wark Lamon	it Neen				An amended filing	
Deb	otor 2	Rhonda Stor	ne Keen	Keen			A supplement show	ving postpetition chapter
(Sp	ouse, if filing)	-					13 expenses as of	the following date:
Unit	ted States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF NORTH	H CAROLINA		MM / DD / YYYY	
Cas	se number							
(If k	nown)							
0	fficial Fo	rm 106J						
		J: Your l	Exper	ises				12/15
Be info	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people a ch another sheet to this				or supplying correct
	t 1: Desci	ribe Your House	hold					
1.	□ No. Go to							
		s Debtor 2 live i	in a conar	ata hausahald?				
			iii a sepai	ate nousenoid:				
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	hold of Del	otor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the			_			□ No
	dependents	names.			Son		9	Yes
					Doughtor		16	□ No
					Daughter			■ Yes □ No
								□ No □ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other the d your depende	han _	No Yes				
Est exp	timate your ex	a date after the b	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your expe	enses
4.		or home owners		uses for your residence. I or lot.	nclude first mortgage	4.	\$	0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b.	\$	70.00
				upkeep expenses		4c.	:	100.00
5.		owner's associat		dominium dues <b>our residence,</b> such as ho	omo oquity loopo	4d. 5.	·	0.00
J.	Auditional	v. tgage payille	cina ioi ye	our residence, such as no	nne equity todits	ο.	Ψ	0.00

	nont Keen Stone Keen Keen	Case num	nber (if known)	
6. Utilities:				
6a. Electricity,	heat, natural gas	6a.	\$	245.00
6b. Water, sev	ver, garbage collection	6b.	\$	35.00
6c. Telephone	, cell phone, Internet, satellite, and cable services	6c.	\$	265.00
6d. Other. Spe	cify:	6d.	\$	0.00
. Food and house	keeping supplies	7.	\$	650.00
. Childcare and c	nildren's education costs	8.	\$	120.00
Clothing, laundr	y, and dry cleaning	9.	\$	100.00
D. Personal care p	roducts and services	10.	\$	70.00
1. Medical and der		11.	\$	100.00
	Include gas, maintenance, bus or train fare.	40	<b></b>	160.00
Do not include ca		12.	·	
	clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	ibutions and religious donations	14.	\$	40.00
Insurance.				
	surance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
15a. Life insurar		15a.		0.00
		15b.		0.00
15c. Vehicle ins		15c.	· · · · · · · · · · · · · · · · · · ·	165.00
15d. Other insu	· · · ·	15d.	\$	0.00
Specify: car ta		16.	\$	38.00
7. Installment or le		47-	Φ.	
17a. Car payme		17a.	·	0.00
17b. Car payme		17b.	·	0.00
17c. Other. Spe	•	17c.	· ·	0.00
17d. Other. Spe	•	17d.	\$	0.00
	of alimony, maintenance, and support that you did not repo		\$	0.00
	our pay on line 5, Schedule I, Your Income (Official Form 1)	<b>061).</b> 10.	· ·	
• •	you make to support others who do not live with you.	40	\$	0.00
Specify:	erty expenses not included in lines 4 or 5 of this form or on	19.	our Incomo	
	on other property	20a.		0.00
20b. Real estate	····	20a. 20b.	· ·	0.00
	omeowner's, or renter's insurance	200. 20c.	·	
			*	0.00
	ce, repair, and upkeep expenses	20d.	·	0.00
	er's association or condominium dues	20e.	·	0.00
1. Other: Specify:	Chapter 13 plan payment	21.	+\$	1,226.00
2. Calculate your n	nonthly expenses			
22a. Add lines 4	hrough 21.		\$	3,484.00
22b. Copy line 22	! (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	·
	and 22b. The result is your monthly expenses.		\$	3,484.00
				0,404.00
•	nonthly net income.		_	
	2 (your combined monthly income) from Schedule I.	23a.	·	3,487.61
23b. Copy your	monthly expenses from line 22c above.	23b.	-\$	3,484.00
	our monthly expenses from your monthly income.	220	\$	3.61
The result	is your monthly net income.	23c.	Ψ	3.01
For example, do yo modification to the t	n increase or decrease in your expenses within the year aff u expect to finish paying for your car loan within the year or do you expec erms of your mortgage?			or decrease because of a
■ No.				
☐ Yes.	Explain here: \$100 after school care expense is listed	as part of th	ne education ev	nense

Fill in this inforr	mation to identify your	case:	
Debtor 1	Mark Lamont Kee	n	
	First Name	Middle Name Last Name	
Debtor 2	Rhonda Stone Ke		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF NORTH CAROLINA	
Case number			
(if known)		<del></del>	☐ Check if this is an
			amended filing
Official Forn	<u>m 106Dec</u>		
Declarat	ion About a	n Individual Debtor's Schedule	<b>PS</b> 12/15
Doolarat		The marriagan Bobton & Comodan	12/13
f two married no	eonle are filing togethe	, both are equally responsible for supplying correct informat	ion
two married po	oopio ai o iiiiiig togotiio	, som are equally responsible for supplying correct informat	
You must file this	s form whenever you f	le bankruptcy schedules or amended schedules. Making a fa	Ise statement, concealing property, or
		connection with a bankruptcy case can result in fines up to	\$250,000, or imprisonment for up to 20
years, or both. 1	8 U.S.C. §§ 152, 1341, 1	519, and 3571.	
0:	- D-1		
Sigi	n Below		
			_
Did you pa	y or agree to pay some	one who is NOT an attorney to help you fill out bankruptcy fo	orms?
■ No			
☐ Yes. N	Name of person		ach Bankruptcy Petition Preparer's Notice,
		Dec	claration, and Signature (Official Form 119)
Under pena	lty of perjury, I declare	that I have read the summary and schedules filed with this de	eclaration and
that they are	e true and correct.		
X /s/ Mar	k Lamont Keen	X /s/ Rhonda Stone Kee	n Keen
	amont Keen	Rhonda Stone Keen K	
	re of Debtor 1	Signature of Debtor 2	
Data •	Fabruary 40, 2046	Data Echanism 40 00	46
Date	February 19, 2016	Date February 19, 20	סוי

Fill in	this inforr	nation to identify you	case:			
Debto	r 1	Mark Lamont Ke	en			
Dalata	- 0	First Name	Middle Name	Last Name		
Debto (Spouse	r 2 e if, filing)	Rhonda Stone K First Name	een Keen Middle Name	Last Name		
United	l States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA		
Case	number _					
(if know	n)					heck if this is an mended filing
∩ffi∠	sial Ea	rm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	12/15
					equally responsible for supp	
numbe	er (if know	n). Answer every ques	stion.			
Part 1	Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1. W	hat is you	r current marital statu	s?			
	Married Not mai					
2. D	uring the l	ast 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	st all of the places you li	ved in the last 3 years. Do no	ot include where you live now	·.	
C	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	l No					
		ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	in the Sources of You	r Income			
Fi	II in the tota	al amount of income you	u received from all jobs and a	g a business during this yeall businesses, including parter together, list it only once ur		dar years?
	] No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calenda ary 1 to De	r year: ecember 31, 2015 )	■ Wages, commissions, bonuses, tips	\$30,058.98	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 41 of 56

Debtor 1 Debtor 2		k Lamon nda Stor	t Keen ne Keen Keen			Cas	e number (if known)		
			-						
				es of income all that apply.	Gross income (before deductio exclusions)	ns and	Sources of inconcern all that a		Gross income (before deductions and exclusions)
			☐ Wag	ges, commissions, es, tips		\$0.00	■ Wages, combonuses, tips	missions,	\$11,081.13
			□Оре	erating a business			Operating a	business	
Includ and of winnir List ea	de inco other pu ngs. If each so	me regard ublic benef you are fili	it payments; pensions ng a joint case and yo ne gross income from	ncome is taxable. Exa s; rental income; inter- ou have income that y	amples of other inco est; dividends; mor ou received togeth	ome are a ney collecter, list it o	limony; child supported from lawsuits; only once under De	royalties; and obtor 1.	ecurity, unemployment, d gambling and lottery
			Debtor	1			Debtor 2		
			Source	es of income be below	Gross income (before deductio exclusions)	ns and	Sources of incomposition Describe below.		Gross income (before deductions and exclusions)
<b>■</b> \	Yes. I	No. Yes  * Subject to  Debtor 1 of	paid that creditor. Do not include payment o adjustment on 4/01, r Debtor 2 or both him 90 days before you fill Go to line 7. List below each cred	ditor to whom you paid to not include paymen is to an attorney for the difference of the following the difference of the	d a total of \$6,225* tts for domestic sup- nis bankruptcy case s after that for cases mer debts. d you pay any credi	or more i port oblig s filed on itor a tota more and	n one or more pay pations, such as ch or after the date of l of \$600 or more?	ments and the support a fadjustment government governme	nd alimony. Also, do
Cred	ditor's	Name and	,	Dates of payme	nt Total an		Amount you	Was this p	payment for
Inside of whi a busi alimor	ers incl lich you siness y ony. No Yes. Li	ude your rough and an	icer, director, person e as a sole proprietor. ents to an insider	partners; relatives of a in control, or owner o 11 U.S.C. § 101. Inc	any general partner of 20% or more of the clude payments for o	rs; partne leir voting domestic	rships of which you g securities; and an support obligations	u are a gene ny managing s, such as ch	ral partner; corporation agent, including one fo nild support and
Insid	der's N	lame and	Address	Dates of payme	nt Total an	nount paid	Amount you still owe	Reason fo	or this payment

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 42 of 56

	btor 1 Mark Lamont Keen btor 2 Rhonda Stone Keen Keen		Cas	e number (if known)		
8.	Within 1 year before you filed for bankrupte insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a d	lebt that benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Par	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury modifications, and contract disputes.					
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>					
	Case title Case number	Nature of the case	Court or agency		Status of the	ne case
	Midland Funding, LLC C/O Sessoms & Rogers PO Box 110564 Durham, NC 27709 VS	Civil	Cumberland Co of Court Attn: Officer 117 Dick Street	:	■ Pending □ On appe □ Conclud	eal
	Mark Keen 16CVD162		Fayetteville, NO	28302		
	<ul> <li>Check all that apply and fill in the details below</li> <li>■ No</li> <li>□ Yes. Fill in the information below.</li> <li>Creditor Name and Address</li> </ul>	Describe the Property  Explain what happened	d	Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec  ■ No □ Yes. Fill in the details.		luding a bank or fin	nancial institution	ı, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		erty in the possessi	on of an assigne	e for the ben	efit of creditors, a
	■ No □ Yes					
Par	tt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 43 of 56

	otor 1 Mark Lamont Keen Rhonda Stone Keen Keen			Case number (	if known)	
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co			s with a total	value of more than	\$600 to any charity
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did y	ou lose anyth	ning because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	how the loss occurred	nclude	be any insurance coverage for the lot the amount that insurance has paid. L ce claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par				. Top only		
	consulted about seeking bankruptcy or pulnclude any attorneys, bankruptcy petition pr  No Yes. Fill in the details.  Person Who Was Paid Address Email or website address			·	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not Yo Smith Dickey Dempster Carpenter H 309 Person St.				02/09/16	\$165.01
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that you	tors or	to make payments to your creditors		r transfer any prope	rty to anyone who
	■ No	, 0 4	3. S			
	Yes. Fill in the details.  Person Who Was Paid  Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alre	<b>busin</b> made a	ess or financial affairs? as security (such as the granting of a se			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred	payments	iny property or received or debts	Date transfer was made
	Person's relationship to you			paid in exc	mange	

	otor 1 btor 2	Rhonda Stone Keen Keen				Case nui	mber (if known)		
19.	benef	n 10 years before you filed for bankru iiciary? (These are often called asset-pr No Yes. Fill in the details.		•	ny property to	a self-settl	ed trust or similar device	of whi	ch you are a
	Nam	e of trust		Description and	value of the p	roperty tran	nsferred	Date	e Transfer was le
Par	rt 8:	List of Certain Financial Accounts, In	strur	ments, Safe Depos	it Boxes, and	Storage Un	its		
20.	sold, Include house	n 1 year before you filed for bankruptomoved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes. Fill in the details.	or ot	her financial accou	ınts; certificat	es of depos			
		e of Financial Institution and Pess (Number, Street, City, State and ZIP		st 4 digits of count number	Type of accinstrument	count or	Date account was closed, sold, moved, or transferred	bet	Last balance fore closing o transfe
21.	cash,	ou now have, or did you have within 1 or other valuables?  No Yes. Fill in the details.	year	before you filed fo	r bankruptcy,	any safe de	eposit box or other depo	itory fo	or securities,
	Nam	e of Financial Institution Tess (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents		o you still ave it?
22.	■ N	you stored property in a storage unit No Yes. Fill in the details.	or pl	ace other than you  Who else has or			ore you filed for bankrupt		o you still
		Address (Number, Street, City, State and ZIP Code) to it? Addres				Describe	e the contents		ave it?
Par	rt 9:	Identify Property You Hold or Contro	l for s	Someone Else					
23.	for so	ou hold or control any property that so omeone.	omeo	ne else owns? Inc	lude any prop	erty you bo	rrowed from, are storing	for, or	hold in trust
	_	es Fill in the details							

Owner's Name
Address (Number, Street, City, State and ZIP Code)

Where is the property?
(Number, Street, City, State and ZIP Code)

(Number, Street, City, State and ZIP Code)

#### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Value

Debtor 1 Mark Lamont Keen
Debtor 2 Rhonda Stone Keen Keen

Case number (if known)

24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environmen	ntal law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of a	nny release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental law? Include settlements ar	nd orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Par	11: Give Details About Your Business or C	connections to Any Business							
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	y of the following connections to any	business?					
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	☐ A partner in a partnership								
	☐ An officer, director, or managing exe	cutive of a corporation							
	☐ An owner of at least 5% of the voting	or equity securities of a corporation							
	■ No. None of the above applies. Go to Pa	art 12.							
	Yes. Check all that apply above and fill i	n the details below for each business	<b>3.</b>						
	Business Name	Describe the nature of the business	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Dates business existed								
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include institutions, creditors, or other parties.									
	■ No □ Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)								

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 46 of 56

Debtor 1	Mark Lamont Keen					
Debtor 2	Rhonda Stone Keen Keen		Case number (if known)			
Part 12	Sign Below					
Tart 12.	oign below					
			nd any attachments, and I declare under penalty of perjury that the answers			
	and correct. I understand that making a fal- ankruptcy case can result in fines up to \$25		, concealing property, or obtaining money or property by fraud in connection			
	. §§ 152, 1341, 1519, and 3571.	,0,000, OI IIII <sub>F</sub>	on some for up to 20 years, or both.			
/e/ Mar	k Lamont Keen	/e/ Rh	onda Stone Keen Keen			
	amont Keen	Rhonda Stone Keen Keen				
	re of Debtor 1	Signature of Debtor 2				
0.9		0.9				
Date F	February 19, 2016	Date	February 19, 2016			
Did vou a	attach additional pages to Your Statement	of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?			
■ No	, , , , , , , , , , , , , , , , , , ,		,			
☐ Yes						
Did you	pay or agree to pay someone who is not ar	attorney to	help you fill out bankruptcy forms?			
■ No		•				
☐ Yes. N	Name of Person . Attach the Bankruptc	y Petition Prej	parer's Notice, Declaration, and Signature (Official Form 119).			

Fill in this information to identify your case:				
Debtor 1	Mark Lamont Keen			
Debtor 2 (Spouse, if filing)	Rhonda Stone Keen	Keen		
United States E	Bankruptcy Court for the:	Eastern District of North Carolina		
Case number (if known)				

Check	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 1,680.00 2,136.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

ebtor 2	Rhonda Stone Keen Keen			Case number	(if known)	-		
				Column A Debtor 1		Column B Debtor 2 o non-filing		
7. Inte	erest, dividends, and royalties			\$	0.00	\$	0.00	
8. <b>Un</b>	employment compensation			\$	0.00	\$	0.00	
	not enter the amount if you contend that the ar Social Security Act. Instead, list it here:	mount received was a bene	efit under					
F	For you	\$	.00					
F	For your spouse		.00					
	nsion or retirement income. Do not include a nefit under the Social Security Act.	ny amount received that w	as a	\$	0.00	\$	0.00	
Do rece don	ome from all other sources not listed above not include any benefits received under the So eived as a victim of a war crime, a crime again nestic terrorism. If necessary, list other source al below.	ocial Security Act or payme st humanity, or internations	ents al or					
				\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if ar	ny.	+	\$	0.00	\$	0.00	
	culate your total average monthly income. ch column. Then add the total for Column A to		\$	2,136.00	+ \$ _	1,680.00	= \$	3,816.00
12. <b>Co</b> <sub>l</sub> 13. <b>Ca</b> l	py your total average monthly income from culate the marital adjustment. Check one:	line 11.					\$	3,816.00
	You are not married. Fill in 0 below.							
	You are married and your spouse is filing wit	th you. Fill in 0 below.						
	You are married and your spouse is not filing	•						
	Fill in the amount of the income listed in line dependents, such as payment of the spouse	11, Column B, that was NO	OT regula e's suppoi	rly paid for the	e house other th	hold expenses an you or you	of you o	r your ents.
	Below, specify the basis for excluding this in adjustments on a separate page.	come and the amount of in	come dev	voted to each	purpose	e. If necessary	, list addit	ional
	If this adjustment does not apply, enter 0 bel	ow.	•					
			_		_			
			-		_			
	Total		\$	0.00	<u> </u>	opy here=>		0.00
14. <b>Y</b> o	our current monthly income. Subtract line 13	3 from line 12.					\$	3,816.00
15. <b>C</b> a	alculate your current monthly income for th	e year. Follow these steps	3:					
15	5a. Copy line 14 here=>						\$	3,816.00
	Multiply line 15a by 12 (the number of mor	nths in a year).					<b>X</b>	12
15	5b. The result is your current monthly income	for the year for this part of	the form.				\$	45,792.00

Mark Lamont Keen

Debtor 1

## Case 16-00868-5-JNC Doc 1 Filed 02/19/16 Entered 02/19/16 15:42:33 Page 49 of 56

Debto Debto			da Stone Keen Keen		Case number (if known)	
16.	Calc	ulate t	he median family income that applies to y	ou. Follow these ste	ps:	
	16a	Fill in t	he state in which you live.	NC		
	16h	Fill in t	ha number of people in your bousehold	4		
			he number of people in your household.  - he median family income for your state and s			¢ 69,727.00
	100.	To find	I a list of applicable median income amounts tions for this form. This list may also be avai	s, go online using the		\$
17.	Hov	_	e lines compare?			
	17a.	•	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N		· · · · · · · · · · · · · · · · · · ·	
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	ulation of Your Disp		
Part	3:	Calc	ulate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Сор	y your	total average monthly income from line 1	1		\$\$
19.	cont	end tha	marital adjustment if it applies. If you are to calculating the commitment period under 1 come, copy the amount from line 13.	married, your spous 1 U.S.C. § 1325(b)(4	e is not filing with you, and you ) allows you to deduct part of your	
			narital adjustment does not apply, fill in 0 on	line 19a.		-\$0.00
			act line 19a from line 18.			\$
20.	Cald	ulate y	our current monthly income for the year.	Follow these steps:		2 946 00
	20a.	Copy I	ine 19b			\$3,816.00
		Multipl	y by 12 (the number of months in a year).			<b>x</b> 12
	20b.	The re	sult is your current monthly income for the ye	ear for this part of the	e form	\$45,792.00
	20c.	Copy t	he median family income for your state and	size of household fro	m line 16c	\$69,727.00
	21.	How d	o the lines compare?			
			ine 20b is less than line 20c. Unless otherwis eriod is 3 years. Go to Part 4.	se ordered by the co	urt, on the top of page 1 of this form, ch	neck box 3, The commitment
			ine 20b is more than or equal to line 20c. Un ommitment period is 5 years. Go to Part 4.	lless otherwise order	ed by the court, on the top of page 1 of	this form, check box 4, The
Part	4:	Sign	Below			
	By s	igning h	nere, under penalty of perjury I declare that t	he information on thi	s statement and in any attachments is t	rue and correct.
X			Lamont Keen		/s/ Rhonda Stone Keen Keen	
			mont Keen of Debtor 1		Rhonda Stone Keen Keen Signature of Debtor 2	
	_	Febr	uary 19, 2016		Date February 19, 2016	
	If vo		DD / YYYY  sed 17a, do NOT fill out or file Form 122C-2.		MM/DD/YYYY	
	•		sed 17b, fill out Form 122C-2 and file it with t		of that form, copy your current monthly	income from line 14 above

**Mark Lamont Keen** 

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Eastern District of North Carolina

In 1	Mark Lamont Keen  Rhonda Stone Keen Keen		Case No.				
	- Miorida Giorio Recit Recit	Debtor(s)	Chapter	13			
	DISCLOSURE OF COMPEN			. ,			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or	to		
				5,000.00			
	Prior to the filing of this statement I have received			165.01			
	Balance Due			4,834.99			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associates of my law f	irm.		
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				4		
5.	In return for the above-disclosed fee, I have agreed to ren	return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	<ul><li>a. Analysis of the debtor's financial situation, and render</li><li>b. Preparation and filing of any petition, schedules, state</li><li>c. Representation of the debtor at the meeting of creditor</li></ul>	ment of affairs and plan which	may be required;				
	<ul> <li>d. [Other provisions as needed]         Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou     </li> </ul>	ns as needed; preparation	emption planning; and filing of moti	preparation and filing of ons pursuant to 11 USC			
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay actions	or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	!		
_	February 19, 2016	/s/ Mark M. Harris	i				
	Date	Mark M. Harris Signature of Attorne	v.				
		Smith Dickey Der	npster Carpenter	& Harris			
		309 Person Street Fayetteville, NC 2					
		910-484-8195 Fa					
		Mark@smithdicke					
		Name of law firm					

## **United States Bankruptcy Court Eastern District of North Carolina**

In re	Rhonda Stone Keen Keen		Case No.	
		Debtor(s)	Chapter	13
	VER	IFICATION OF CREDITOR M	IATRIX	
The ab	ove-named Debtors hereby verify	that the attached list of creditors is true and corr	rect to the best	of their knowledge.
Date:	February 19, 2016	/s/ Mark Lamont Keen		
		Mark Lamont Keen		
		Signature of Debtor		
Date:	February 19, 2016	/s/ Rhonda Stone Keen Keen		
		Rhonda Stone Keen Keen		

Signature of Debtor

**Mark Lamont Keen** 

Advanced Home Care Attn:officer PO Box 580089

Charlotte, NC 28258

Ally Financial Attn: Officer

Post Office Box 380901 Minneapolis, MN 55438-0901

Calvary SPV,LLc Attn:officer 500 Summitt Lake Drive STE 400

Valhalla, NY 10595

Capital One Retail Services Attn: Officer Department 7680

Carol Stream, IL 60116-7680

Carolina Imaging Attn: Managing Agent 3628 Cape Center Drive Fayetteville, NC 28304

Credit Bureau Systems Attn: Managing Agent

PO Box 482 Clarksville, TN 37040

Cumberland County Tax Collector

Attn: Officer

Post Office Box 1829 Fayetteville, NC 28302

Duke University Hospital Attn: Managing Agent PO Box 91040 Durham, NC 27708

GM Financial Attn:officer PO Box 78143 IC Systems Attn:officer

444 Highway 96 East Saint Paul, MN 55127

Internal Revenue Service

Attn: Officer

Post Office Box 7346 Philadelphia, PA 19101

Midland Funding C/O Sessoms & RogersSyncb/walmart Attn:officer Attn:officer

Sprint

Attn: Manging Agent

PO Box 105243

Syncb/Walmart

Orlando, FL 32896

PO Box 965024

Wells Fargo

PO Box 10335

Orlando, FL 32896

Attn: Managing Agent

Des Moines, IA 50306

Attn:officer PO Box 965036

Atlanta, GA 30348

PO Box110564 Durham, NC 27709

Midland Funding LLC

Attn: Officer 8875 Aero Drive San Diego, CA 92123

Midland Funding,LLC 2365 Northside Drive

Attn:officer Ate 300

San Diego, CA 92108

North Carolina Dept. of Revenue

Attn: Managing Agent PO Box 25000 Raleigh, NC 27640

SCA Collections Inc

Attn: Officer

300 E Arlington Blvd, Ste 6-A Greenville, NC 27858-5016

Southeastern Regional Medical Center

300 W. 27th Street

Attn:officer

Lumberton, NC 28358

Southeastern Spine Pain Clinic

Attn:officer

106 Farm Brook Drive

Ste. A

Lumberton, NC 28358